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Application Number	10/769,508
Filing Date	01/15/2004
First Named Inventor	DECKER
Art Unit	
Examiner Name	
Attorney Docket Number	62077-00007

I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: 35985 Please change the correspondence address for the above-identified application to: The address associated with
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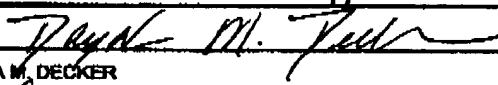
Address: P.O. BOX 2111

City: SANTA CLARITA State: CA Zip: 91386-2111

Country: U.S.

Telephone: 866-824-8680 Fax: 866-824-8680

I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	DAYNA M. DECKER		
Date	NOV. 19, 2004	Telephone	(818) 762-6068

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

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